24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Every Voice Action	C C00566208
	C 00300200
Check if X 24-hour report 48-hour report New report Amends report filed	d on
Full Name of Payee	Date of Public Distribution/Dissemination
Stones' Phones	11 03 7 2014
Mailing Address 1309 F St NW	Amount
Ste 200 City State Zip Code	4061.41
Washington DC 20004-1183	Transaction ID : VN7BA9XRAD7 Date of Disbursement or Obligation
Purpose of Expenditure GOTV Phone Calls Category/ Type 001	11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	ce Sought: House District:
Rick Weiland Oppose	President Senate State: SD
Calendar Year-To-Date Per Election for Office Sought Disb. 2014	oursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	-
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y = Y
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	oursement For: Primary General
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	4061.41
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	4061.41
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
2 4.10	11 04 2014
Signature	